

<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)</b>  <input type="checkbox"/> Declaration Submitted with Initial Filing    OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge) (37 CFR 1.16 (e)) required)	Attorney Docket Number	PU4928USw
	First Named Inventor	Pankaj AGARWAL
	COMPLETE IF KNOWN	
	Application Number	
	Filing Date	
	Art Unit	
	Examiner Name	

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**BIOLOGICAL DATA SET COMPARISON METHOD**

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on ( ) as United States Application Number or PCT International

Application Number **PCT/US2004/019932** filed June 22, 2004 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02/B attached hereto:

[Page 1 of 2]

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**DECLARATION – Utility or Design Patent Application**Direct all correspondence to: ☒ Customer Number **23347** OR ☐ Correspondence address below

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State

ZIP

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Telephone

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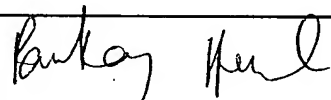
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

**NAME OF SOLE OR FIRST INVENTOR:**☐ A petition has been filed for this unsigned inventor

Given Name  
(first and middle [if any])  
**Pankaj**

Family Name  
Or Surname  
**AGARWAL**

Inventor's  
Signature



Date

11/8/05

Residence: City

State

Country

Citizenship

**King of Prussia****PA****US****IN**

Mailing Address

**c/o GlaxoSmithKline, Corporate Intellectual Property Department, Five Moore Drive, PO Box 13398**

City

State

Zip Code

Country

**Research Triangle Park****NC****27709****US****NAME OF SECOND INVENTOR:**☐ A petition has been filed for this unsigned inventor

Given Name  
(first and middle [if any])

Family Name  
Or Surname

**William Charles Jr.****REISDORF**

Inventor's  
Signature



Date

11/10/05

Residence: City

State

Country

Citizenship

**King of Prussia****PA****US****US**

Mailing Address

**c/o GlaxoSmithKline, Corporate Intellectual Property Department, Five Moore Drive, PO Box 13398**

City


State

ZIP

Country

**Research Triangle Park****NC****27709****US**☐ Additional inventors are being named on the

supplemental Additional Inventor(s) sheet(s) PTO/SB/02S or 02LR attached hereto

<b>DECLARATION</b>		<b>ADDITIONAL INVENTOR(S)</b> Supplemental Sheet Page 3 of 6	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Sujoy		GHOSH	
Inventor's Signature 		Date 11-10-2005	
Residence: City Durham	State NC	Country US	Citizenship IN
Mailing Address c/o GlaxoSmithKline, Corporate Intellectual Property Department, Five Moore Drive, PO Box 13398			
City Research Triangle Park	State NC	ZIP 27709	Country US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Vinod D.		KUMAR	
Inventor's Signature		Date	
Residence: City King of Prussia	State PA	Country US	Citizenship US
Mailing Address c/o GlaxoSmithKline, Corporate Intellectual Property Department, Five Moore Drive, PO Box 13398			
City Research Triangle Park	State NC	ZIP 27709	Country US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Mark Robert		HURLE	
Inventor's Signature		Date	
Residence: City King of Prussia	State PA	Country US	Citizenship US
Mailing Address c/o GlaxoSmithKline, Corporate Intellectual Property Department, Five Moore Drive, PO Box 13398			
City Research Triangle Park	State NC	ZIP 27709	Country US

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Given Name (first and middle [if any])		Family Name or Surname	
Vinod D.		KUMAR	
Inventor's Signature <i>D. Vinod Kumar</i>		Date 11/7/2005	
Residence: City King of Prussia	State PA	Country US	Citizenship US
Mailing Address c/o GlaxoSmithKline, Corporate Intellectual Property Department, Five Moore Drive, PO Box 13398			
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Mark Robert		HURLE	
Inventor's Signature 			Date 11/7/05
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Karen Stephanie		KABNICK	
Inventor's Signature 		Date 11/7/05	
Residence: City King of Prussia	State PA	Country US	Citizenship US
Mailing Address c/o GlaxoSmithKline, Corporate Intellectual Property Department, Five Moore Drive, PO Box			
City Research Triangle Park	State NC	ZIP 27529	Country US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Paul Robert		MCALLISTER	
Inventor's Signature		Date	
Residence: City King of Prussia	State PA	Country US	Citizenship US
Mailing Address c/o GlaxoSmithKline, Corporate Intellectual Property Department, Five Moore Drive, PO Box 13398			
City Research Triangle Park	State NC	ZIP 27909	Country US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
David Burdette		SEARLS	
Inventor's Signature		Date	
Residence: City King of Prussia	State PA	Country US	Citizenship US
Mailing Address c/o GlaxoSmithKline, Corporate Intellectual Property Department, Five Moore Drive, PO Box 13398			
City Research Triangle Park	State NC	ZIP 27909	Country US

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Karen Stephanie		KABNICK	
Inventor's Signature		Date	
Residence: City King of Prussia	State PA	Country US	Citizenship US
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Given Name (first and middle (if any))		Family Name or Surname	
Paul Robert		MCALLISTER	
Inventor's Signature <i>Paul Robert McAllister</i>		Date 8-Nov-2005	
Residence: City King of Prussia	State PA	Country US	Citizenship US
Mailing Address c/o GlaxoSmithKline, Corporate Intellectual Property Department, Five Moore Drive, PO Box 13398			
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David Burdette		SEARLS	
Inventor's Signature 		Date 14 Nov 2005	
Residence: City King of Prussia	State PA	Country US	Citizenship US
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Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])	Family Name or Surname		
Kay Satoshi	TATSUOKA		
Inventor's Signature 			Date 11/29/05
Residence: City King of Prussia	State PA	Country US	Citizenship US
Mailing Address c/o GlaxoSmithKline, Corporate Intellectual Property Department, Five Moore Drive, PO Box 13398			
City Research Triangle Park	State NC	ZIP 27709	Country US
Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])	Family Name or Surname		
Liwen	LIU		
Inventor's Signature			Date
Residence: City Durham	State NC	Country US	Citizenship CN
Mailing Address c/o GlaxoSmithKline, Corporate Intellectual Property Department, Five Moore Drive, PO Box 13398			
City Research Triangle Park	State NC	ZIP 27709	Country US
Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])	Family Name or Surname		
Michal	MAGID-SLAV		
Inventor's Signature			Date
Residence: City King of Prussia	State PA	Country US	Citizenship IL
Mailing Address c/o GlaxoSmithKline, Corporate Intellectual Property Department, Five Moore Drive, PO Box 13398			
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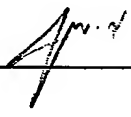
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Given Name (first and middle [if any])		Family Name or Surname	
Liwen		LIU	
Inventor's Signature <i>liwen liu</i>		Date Nov 7, 2005	
Residence: City Durham	State NC	Country US	Citizenship CN
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Mailing Address c/o GlaxoSmithKline, Corporate Intellectual Property Department, Five Moore Drive, PO Box 13398			
City Research Triangle Park	State NC	ZIP 27709	Country US

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DECLARATION		ADDITIONAL INVENTOR(S) Supplemental Sheet Page 6 of 6	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Dmitri V		ZAYKIN	
Inventor's Signature 		Date 11/17/05	
Residence: City Raleigh	State NC	Country US	Citizenship RU
Mailing Address 2416 GoldFinch Way			
City Raleigh	State NC	ZIP 27606	Country US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	ZIP	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
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### SMITHKLINE BEECHAM CORPORATION

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John Scott Young	Kathryn L. Coulter		

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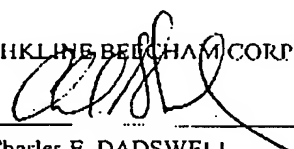
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Date:

26/01/2005

SMITHKLINE BEECHAM CORPORATION

By:

  
Charles E. DADSWELL

Attorney (Resolution attached)

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The undersigned, William Charles REISDORF, Jr., a citizen of the United States of America whose address is: c/o GlaxoSmithKline, 709 Swedeland Road, King of Prussia, Pennsylvania 19406 hereby makes, constitutes and appoints

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Signature: \_\_\_\_\_

Date: 11/10/05

Place: King of Prussia, PA, USA

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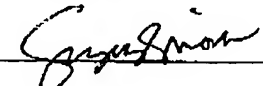
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Signature: 

Date: 11-10-2005 Place: Durham, NC 27709

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Signature: D. Vinod Kumar

Date: 11/7/2005 Place: King of Prussia, PA, USA